| Provider | NEMASKET GROUP | | Provider Address 109 | Fairhaven Road, M | lattapoisett |
|--|--------------------------------|----------|--|--|---|
| Survey Team | Napolitan,Tina; Marchese, | Michael; | Date(s) of Review 06-J | IUN-23 to 09-JUN-2 | 23 |
| Mid-Cycle Sco | ope and results : | | | | |
| Service Groupin | g Licensure level and duration | | Sanction status prior to Mid- Cycle | Combined Results post- Mid-Cycle; | Sanction status post Mid- Cycle |
| Residential and Individual Home Supports | Defer Licensure | 7/9 | ⊠ Eligible for new business | 2 Year License with Mid-Cycle Review 74/76 (97.37%) | 区 Eligible for New Business (80% or more std. met; no critical std. not met) |
| 2 Locations 3 Audits | | | ☐ Ineligible for new business. | | ☐ Ineligible for New Business (<=80% std met and/or more critical std. not met) |
| Employment and Day Supports | Defer Licensure | 4/9 | ⊠ Eligible for new business | 2 Year License with Mid-Cycle Review 34/39 (87.18%) | Eligible for New Business (80% or more std. met; no critical std. not met) |
| 3 Locations 13 Audits | | | ☐ Ineligible for new business. | | ☐ Ineligible for New Business (<=80% std met and/or more critical std. not met) |

Mid-Cycle Review Final Report

Summary of Ratings

Employment and Day Supports Areas Needing Improvement on Standards not met:

| Indicator # | L1 |
|----------------------------|---|
| Indicator | Abuse/neglect training |
| Area Need Improvement | Four individuals had not been trained and/or their guardians had not been provided with information on how to report alleged abuse/neglect. The agency needs to ensure that all individuals are trained, and guardians are informed on how to report alleged abuse/neglect. |
| Status at mid-cycle | The agency reports that they have revised their practices to ensure all individuals are trained and guardians are provided with information on how to report abuse and neglect on an annual basis. Eleven of thirteen individuals had been trained and/or their guardians were provided with information. |
| #met /# rated at mid-cycle | 11/13 |
| Rating | MET |

| Indicator # | L8 |
|-------------|--|
| Indicator | Emergency Fact Sheets |
| | Ten individuals' emergency fact sheets were lacking all required information, including diagnoses, medications, and other personal emergency information. The agency needs to ensure that all emergency fact sheets are current, accurate and include all require information. |

| | Four of thirteen individuals' Emergency Fact Sheet lacked all required components, including current medications, information on allergies, and relevant emergency/ community search, i.e., 'Distinguishing Features, Places Frequented, and Relevant Capabilities, Limitations and Preferences'. The agency needs to ensure that all individuals' Emergency Fact Sheets are complete, current and accurate, and available on site. |
|----------------------------|--|
| #met /# rated at mid-cycle | 9/13 |
| Rating | NOT MET |

| Indicator # | L38 |
|----------------------------|--|
| Indicator | Physician's orders |
| Area Need Improvement | Health management protocols for four individuals either lacked accurate/complete directions, and/or staff were not knowledgeable concerning health management protocols, or they were not being correctly followed. The agency needs to ensure that when individuals require health management protocols, that they are complete and accurate to medical orders, and that staff are knowledgeable of the protocol and implementing it correctly. |
| Status at mid-cycle | Health treatment protocols for six of seven individuals were in place and included all required components, including staff training/ knowledge. |
| #met /# rated at mid-cycle | 6/7 |
| Rating | MET |

| Indicator # | L49 |
|-------------|--------------------------|
| Indicator | Informed of human rights |

| Area Need Improvement | Four individuals had not been trained and/or their guardians had not been provided information on their human rights, and how to file a grievance or whom to contact if they had a concern. The agency needs to ensure that individuals have been trained and guardians have been informed of their human rights, and how to file a grievance or whom to contact if they have any concerns. |
|----------------------------|---|
| Status at mid-cycle | The agency reports that they have revised their practices to ensure all individuals are trained and guardians are provided with information on human rights and how to file a grievance on an annual basis. Eleven of thirteen individuals had been trained and/or guardians had been provided with information. |
| #met /# rated at mid-cycle | 11/13 |
| Rating | MET |

| Indicator # | L67 |
|----------------------------|---|
| Indicator | Money mgmt. plan |
| Area Need Improvement | Six individuals lacked complete and accurate money management support plans, including the lack of a teaching/training plan to increase their independence. The agency needs to ensure that money management plans are complete and accurate and include a training plan when indicated in their ISP. |
| Status at mid-cycle | Two of four individuals did not have money management support plans in place, as indicated in their ISPs. The agency needs to ensure that money management plans are complete and accurate and include a training plan when indicated in their ISP. |
| #met /# rated at mid-cycle | 2/4 |
| Rating | NOT MET |

| Indicator # | L86 |
|----------------------------|--|
| Indicator | Required assessments |
| | Required ISP assessments for six individuals had not been submitted within the required time frame. The agency needs to ensure that all required assessments are completed and submitted in preparation for individuals' ISPs. |
| | Required ISP assessments for four of eight individuals had not been submitted within the required timelines. The agency needs to ensure that all required ISP assessments are submitted within required timelines. |
| #met /# rated at mid-cycle | 4/8 |
| Rating | NOT MET |

| Indicator # | L87 |
|----------------------------|---|
| Indicator | Support strategies |
| · | Support strategies for four individuals had not been submitted within the required time frame. The agency needs to ensure that individuals' support strategies are completed and submitted in preparation for the ISP. |
| | ISP support strategies for four of eight individuals had not been submitted within the required timelines. The agency needs to ensure that all required ISP support strategies are submitted within required timelines. |
| #met /# rated at mid-cycle | 4/8 |
| Rating | NOT MET |

| Indicator # | L91 |
|-------------|---------------------|
| Indicator | Incident management |

| | For one service type, two of five incident reports reviewed in HCSIS were submitted late and one of the two was also finalized late. The agency needs to ensure that incidents are reported and reviewed as mandated by regulation. |
|----------------------------|---|
| Status at mid-cycle | For Employment and Day supports, the agency had complied with the timeline requirements and/or were knowledgeable regarding the submission of incident reports in HCSIS. |
| #met /# rated at mid-cycle | 3/3 |
| Rating | MET |

| Indicator # | L94 (05/22) | |
|----------------------------|---|--|
| Indicator | Assistive technology | |
| Area Need Improvement | Seven individuals had not been evaluated to determine if they would benefit from the use of assistive technology to increase their independence, and they were not utilizing any assistive technology. The agency needs to ensure that individuals have been assessed to identify any assistive technology that may be of benefit, and assistive technology to maximize independence is provided when needed. | |
| Status at mid-cycle | Five of thirteen individuals had either not been assessed or were not give the opportunity to explore, trial and use assistive technology in efforts to increase their independence. The agency needs to ensure that individu have been assessed and been provided opportunities to explore, trial and use assistive technology. | |
| #met /# rated at mid-cycle | 8/13 | |
| Rating | NOT MET | |

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Residential and Individual Home Supports Areas Needing Improvement on Standards not met:

| residential and marviadal frome supports Areas Needing improvement on standards not met. | | |
|--|--|--|
| Indicator # | L8 | |
| Indicator | Emergency Fact Sheets | |
| Area Need Improvement | For one of two individuals, the Emergency Fact sheet lacked information about the individual's diagnosis. The agency needs to ensure that all diagnosis effecting potential emergency services need to be contained on the emergency fact sheet. | |
| Status at mid-cycle | One of three individual's Emergency Fact Sheet lacked all required components, including emergency/ community search information, i.e., 'Places Frequented, and Relevant Capabilities, Limitations and Preferences'. The agency needs to ensure that all individuals' Emergency Fact Sheets are complete, current and accurate, and available on site. | |
| #met /# rated at mid-cycle | 2/3 | |
| Rating | NOT MET | |

| Indicator # | L11 |
|----------------------------|--|
| Indicator | Required inspections |
| Area Need Improvement | For two homes, there were no inspections conducted on furnaces. The agency needs to ensure that annual inspections occur for all furnaces. |
| Status at mid-cycle | Required annual inspections for two homes were current. |
| #met /# rated at mid-cycle | 2/2 |
| Rating | MET |

| Indicator # | L21 |
|-------------|---------------------------|
| Indicator | Safe electrical equipment |

| | ina Systement markeport |
|----------------------------|---|
| Area Need Improvement | One apartment owned by the agency had a electrical panel that were not labeled. The agency needs to ensure that all electrical panels are labeled for homes they own or lease. |
| Status at mid-cycle | Two homes had safe electrical equipment, including labeled circuit breakers. |
| #met /# rated at mid-cycle | 2/2 |
| Rating | MET |
| | |
| Indicator # | L29 |
| Indicator | Rubbish/combustibles |
| Area Need Improvement | In one of home there were combustible materials located within three feet of the furnace. The agency needs to ensure that there is no rubbish or combustible within three feet of furnaces. |
| Status at mid-cycle | Two homes were free of rubbish and/or other combustibles within three feet of their heating systems. |
| #met /# rated at mid-cycle | 2/2 |
| Rating | MET |
| | |
| Indicator # | L35 |
| Indicator | Preventive screenings |
| Area Need Improvement | One individual did not have routine preventative screenings. The agency needs to ensure health care screenings are completed in a timely manner according to recommended guidelines. |
| Status at mid-cycle | Routine health care screenings for three individuals had been completed in a timely manner, including COVID vaccinations and boosters. |
| #met /# rated at mid-cycle | 3/3 |
| | |

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| Rating | MET |
|----------------------------|--|
| | · |
| Indicator # | L38 |
| Indicator | Physician's orders |
| Area Need Improvement | One individual had a diagnosis that required a health care protocol with specialized diet, that needs to be developed. Another health care protocol was not complete for all potential scenarios resulting from her diagnosis. The agency needs to ensure that when an individual has a diagnosis which requires a health care protocol, that one is developed and that it contains all necessary components to ensure proper medical monitoring and intervention. |
| Status at mid-cycle | A health treatment protocol for one individual's seizure disorder was in place and included all required components, including staff training/ knowledge. |
| #met /# rated at mid-cycle | 1/1 |
| Rating | MET |
| | |
| Indicator # | L43 |
| Indicator | Health Care Record |
| Area Need Improvement | One individual's health care record did not include all diagnosis nor did it reference her modified diet. The agency needs to ensure that all individuals' health care records contain all diagnosis and specialized diets. |
| Status at mid-cycle | Three individuals' health care records were reviewed. The agency ensured that for all three individuals, the health care record contained accurate and current information. |
| #met /# rated at mid-cycle | 3/3 |

MET

Rating

| Indicator # | L67 | | |
|--|--|--|--|
| Indicator | Money mgmt. plan | | |
| Area Need Improvement One individual lacked a training plan for money managem needs to ensure that training plans are developed for individual lacked in their ISP. | | | |
| | One of three individual's money management plan did not include a teaching/ training plan to support him to increase his money mgmt. independence, as indicated in his ISP. The agency needs to ensure that training plans are developed for individuals when the need is documented in their ISP. | | |
| #met /# rated at mid-cycle | 2/3 | | |
| Rating | NOT MET | | |

| Indicator # | L94 (05/22) | |
|----------------------------|--|--|
| Indicator | Assistive technology | |
| Area Need Improvement | One individual had not been evaluated to determine if they could benefit from the use of assistive technology to increase their independence, nor were any assistive technology in use. The agency needs to evaluate individuals for areas in which their independence could be improved throu the use of assistive technology and to ensure that recommended devices are obtained and in use. | |
| Status at mid-cycle | Three individuals' assistive technology needs were had either been assessed and/or assistive technology had been explored, trialed or was in use. | |
| #met /# rated at mid-cycle | 3/3 | |
| Rating | MET | |

DEPARTMENT OF DEVELOPMENTAL SERVICES LICENSURE AND CERTIFICATION Mid-Cycle Review Final Report

Mid-Cycle Review Final Report

Mid-Cycle Detail Report

For provider and area office use only. This page elaborates on all of the indicators reviewed at follow-up where the standard was not met.

Employment and Day Supports

| Indicator | Service Type | Location | Individual | Issue |
|-----------|---------------------------------|---|------------|--|
| L1 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | DB | DB last completed training on how to report alleged abuse/ neglect more than a year ago. |
| L1 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | KS | KS was not presented with information regarding how to report abuse and neglect on an annual basis. |
| L8 | Community Based Day Services | 107 Fairhaven Rd Mattapoisett MA 02739 | AA | The emergency fact sheet lacks information regarding competency, relevant capabilities, limitations and preferences, significant behavioral characteristics and distinguishing marks. |
| L8 | Community Based Day Services | 107 Fairhaven Road Mattapoisett MA 02739 | МО | MO's Emergency Fact Sheet lacked the following emergency/ community search information: "Distinguishing Marks, Places Frequented, and Relevant Capabilities, Limitations & Preferences." |
| L8 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | DB | DB's Emergency Fact Sheet lacked the following emergency/ community search information: "Distinguishing Marks, and Relevant Capabilities, Limitations & Preferences". |
| L8 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | МТ | The medications on the emergency fact sheet are outdated and this individuals allergies are not listed on the emergency fact sheet. |

| ₽ L38 | Community Based Day Services | 107 Fairhaven Road Mattapoisett MA 02739 | JC | There was no MD order and/or authorized practitioner approval for JC's seizure protocol. |
|-------|---------------------------------|---|----|--|
| L49 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | DB | DB last completed basic human rights and grievance procedure training more than a year ago. |
| L49 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | KS | KS was not presented with information regarding human rights and the agency grievance procedure on an annual basis. |
| L67 | Community Based Day Services | 107 Fairhaven Road Mattapoisett MA 02739 | JC | The agency has not developed/ implemented a Money Management Plan for supporting JC, as indicated in his ISP. |
| L67 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | CR | The agency has not developed/ implemented a Money Management Plan for supporting CR as indicated in her ISP. |
| L86 | Community Based Day Services | 107 Fairhaven Rd Mattapoisett MA 02739 | AA | The request for ISP assessments was due to be sent on 1/25/23, however was sent on 2/6/23, thus the agency was not given sufficient time to comply with timelines. This rating is not included in the score. |
| L86 | Community Based Day Services | 107 Fairhaven Rd Mattapoisett MA 02739 | AR | The request for ISP assessments was due to be sent on 6/22/22, however was sent on 7/5/22, thus the agency was not given sufficient time to comply with timelines. This rating is not included in the score. |
| L86 | Community Based Day Services | 107 Fairhaven Rd Mattapoisett MA 02739 | HC | ISP assessments due 11/30/22 were submitted 12/8/22. |
| L86 | Community Based Day Services | 107 Fairhaven Road Mattapoisett MA 02739 | AM | The request for ISP assessments was due to be sent on 7/11/22, however was sent on 8/3/22, thus the agency was not given sufficient time to comply with timelines. |

| L86 | Community Based Day Services | 107 Fairhaven Road Mattapoisett MA 02739 | MC | MC's ISP Safety Assessment was submitted on 12/7/22, nine days prior to her 12/16/22 ISP meeting date. |
|-----|---------------------------------|---|----|---|
| L86 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | AM | The request for ISP assessments was due to be sent on 7/11/22, however was sent on 8/3/22, thus the agency was not given sufficient time to comply with timelines. This rating is not included in the score. |
| L86 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | DB | DB's Safety Assessment was submitted on 7/18/22, 10 days prior to his 8/1/22 ISP meeting date. However, the agency was not provided with adequate notice of its due date. This rating is not included in the score. |
| L86 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | HF | HF's ISP Safety Assessment was submitted on 3/20/23, 14 days prior to his 4/3/23 ISP meeting date. |
| L86 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | MT | ISP assessments due 5/1/23 were submitted 5/2/23. |
| L87 | Community Based Day Services | 107 Fairhaven Rd Mattapoisett MA 02739 | AA | The request for ISP support strategies was due to be sent on 1/25/23, however was sent on 2/6/23, thus the agency was not given sufficient time to comply with timelines. This rating is not included in the score. |
| L87 | Community Based Day Services | 107 Fairhaven Rd Mattapoisett MA 02739 | AR | The request for ISP support strategies was due to be sent on 6/22/22, however was sent on 7/5/22, thus the agency was not given sufficient time to comply with timelines. This rating is not included in the score. |
| L87 | Community Based Day Services | 107 Fairhaven Rd Mattapoisett MA 02739 | HC | ISP support strategies due 11/30/22 were submitted 12/8/22. |

| L87 | Community Based Day Services | 107 Fairhaven Road Mattapoisett MA 02739 | АМ | The request for ISP support strategies was due to be sent on 7/11/22, however was sent on 8/3/22, thus the agency was not given sufficient time to comply with timelines. |
|-------------|---------------------------------|---|----|---|
| L87 | Community Based Day Services | 107 Fairhaven Road Mattapoisett MA 02739 | МС | MC's CBDS support Strategy was submitted on 12/12/22, four days prior to her 12/16/22 ISP meeting date. |
| L87 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | АМ | The request for ISP support strategies was due to be sent on 7/11/22, however was sent on 8/3/22, thus the agency was not given sufficient time to comply with timelines. This rating is not included in the score. |
| L87 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | DB | DB's Employment Support Strategy was submitted on 7/18/22, 10 days prior to his 8/1/22 ISP meeting date. However, the agency was not provided with adequate notice of its due date. this rating is not included in the score. |
| L87 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | HF | HF's Employment Support Strategy was submitted on 3/20/23, 14 days prior to his 4/3/23 ISP meeting date. |
| L87 | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | MT | ISP support strategies due 5/1/23 were submitted 5/2/23. |
| L94 (05/22) | Community Based Day Services | 107 Fairhaven Rd Mattapoisett MA 02739 | HC | This individual has not been assessed nor have there been trials of potential assistive technology. |
| L94 (05/22) | Community Based Day Services | 107 Fairhaven Road Mattapoisett MA 02739 | MC | MC has not been assessed to determine if he would benefit from any assistive technology to maximize her independence in the community. |

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| L94 (05/22) | Community Based Day Services | 107 Fairhaven Road Mattapoisett MA 02739 | MO has not been assessed to determine if he would benefit from any assistive technology to maximize her independence in the community. |
|-------------|---------------------------------|---|---|
| L94 (05/22) | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | CR has not been assessed to determine if he would benefit from any assistive technology to maximize his independence in the community and/or at work. |
| L94 (05/22) | Employment Support Services | 107 Fairhaven Rd Mattapoisett MA 02739 | HF has not been assessed to determine if he would benefit from any assistive technology to maximize his independence in the community and/or at work. |

Residential and Individual Home Supports

| Indicator | Service Type | Location | Individual | Issue |
|-----------|-----------------------------|--|------------|--|
| L8 | Individual Home Supports | 18 WILLIAM ST APT 1W FAIRHAVEN MA 02719 | | MM's Emergency Fact Sheet lacked the following emergency/ community search information: "Places Frequented, and Relevant Capabilities, Limitations and Preferences". |
| L67 | Individual Home Supports | 18 WILLIAM ST APT 1W FAIRHAVEN MA 02719 | | MM's Money Management Plan does not include a teaching/ training plan, as requested in his ISP, to support him to increase his money mgmt. independence. |